

AF 2857

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/596,169	
		Filing Date	June 16, 2000	
		First Named Inventor	Sunshine, Steven A.	
		Art Unit	2857	
Total Number of Pages in This Submission		2	Examiner Name	Carol S.W. Tsai
			Attorney Docket Number	018564-003610US

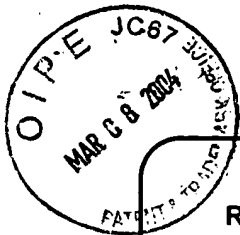
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ENCLOSURES (Check all that apply)		
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Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP Joseph R. Snyder Reg. No. 39,381
Signature	
Date	March 2, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Marta R. Vanegas		
Signature		Date	March 2, 2004



PTO/SB/83 (09-03)

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	09/596,169
Filing Date	June 16, 2000
First Named Inventor	Sunshine, Steven A.
Art Unit	2857
Examiner Name	Carol S.W. Tsai
Attorney Docket Number	018564-003610US

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record
- ☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ all the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: at the request of the Applicant

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ Customer Number

**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Foley & Lardner				
Address	3000 K Street, N.W.				
Address	Suite 500				
City	Washington	State	D.C.	ZIP	20007
Country	United States of America				
Telephone	202.672.5300	Fax	202.672.5399		
Name	Joseph R. Snyder				
Signature				Registration No.	39,381
Date	March 2, 2004				

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.